UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 11-R-0001 CUSTOMER NUMBER: 1960

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Jackson Laboratory, The 600 Main Street Bar Harbor, ME 04609

Telephone: (207) -288-6000

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

REPORT OF ANIMALS	USED BY OR UNDER (	CONTROL OF RESEAR	CH FACILITY / Attach addition:	al sheets if necessary or use APHIS Form 7023A )	<del>-</del>
A.  Animals Covered  By The Animal  Welfare Regulations	B. Number of animals being bred, conditioned, or heid for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					
?eromyscus	50	64			64
leriones	0	42			42
	1				

# ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Frederic J. Driscoll, III Institutional

HIS FORM 7023 (Replaces VS FORM 18-23 (OCT 88), which is obsolete.

( AUG 91 )

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 11-R-0002

CUSTOMER NUMBER: 71

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
( TYPE OR PRINT )

Maine Medical Center 81 Research Drive Scarborough, ME 04074

Telephone: (207) -761-9090

NOV 18 2002

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

## FACILITY LOCATIONS (Sites) - See Atached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )						
A.  Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS	
4. Dogs						
5. Cats						
6. Guinea Pigs						
7. Hamsters						
8. Rabbits						
9. Non-human Primate						
10. Sheep			·			
11. Pigs			84		84	
12. Other Farm Animals						
13. Other Animals						

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official )					
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print	DATE SIGNED			
	Kenneth Ault MD Interim Director	11/19/02			

See attached form for additional information Interagency Report Co

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 11-R-0007

CUSTOMER NUMBER: 538

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Capricorn Products, Inc. 301 Us Route 1

Scarborough, ME 04074

Telephone: (207) -846-6269

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

Strockesia	Bicsclutions
WALCH TE DIC	12,0,20,10 4100

FACILITY LOCATIONS (Sites) - See Atached Listing

id Windham, ME REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, leaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E)
4. Dogs					
5. Cats		1, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
Conto	0	93	M	0	100
13. Other Animals					r

## ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIA	L
( Chief Executive Officer or Legally Responsible Institutional Official )	

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

JANE K. HAUEY

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 11-R-0012

CUSTOMER NUMBER: 68

FORM APPROVED OMB NO. 0579-0036

Bushover'S Biologicals, Inc.
ANNUAL REPORT OF RESEARCH FACILITY

Bushover'S Biologicals, Inc.
Cross Hill Road

-R+2-Dox 109 992 Cross Hill Rd

Vassalboro, ME 04989

Telephone: (207) -923-3374

FACILITY LOCATIONS (Sites) - See Atached Listing

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

testing, expenments, research, or surgery but not ye	tests were conducted involving no pain, distress, or use of pain- relieving drugs.	research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	TOTAL NUMBEF OF ANIMALS ( COLUMNS C + D + E )
NY / 7\	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A
NT / 7	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A
40	200	0	0	200
N/A	N/A	N/A	N/A	N/A
NI / 7\	NI / A	N/A	N/A	N/A
· ·		N/A		N/A
0	1	0	0	1
33 N/A	96 N/A	0 N/A	0 N/A	96 N/A
	N/A N/A N/A N/A 40 N/A N/A N/A	N/A   N/A	N/A   N/A	N/A       N/A       N/A       N/A         0       1       0       0         33       96       0       0

### ASSURANCE STATEMENTS

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(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Pohert W Bushover-Braside

1.11.1

Robert W. Bushover-President/CEO

This report is required by law (7 USC 2143). Failure to report according to the regulations can

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 11-R-0014

CUSTOMER NUMBER: 77

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Colby College Arey Building Colby College Waterville, ME 04901

Telephone: (207) -872-3326

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, lesting, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing Arey Bldg., Room 405

A.  Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, expeniments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E)
4. Dogs					0
5. Cats					0
6. Guinea Pigs					0
7. Hamsters					0
8. Frabbits					0
9. Non-human Primate					0
10. Sheep					0
11. Pigs					0
12. Other Farm Animals					0
13. Other Animals					0
And the second s				·	:

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  ( Chief Executive Officer or Legally Responsible Institutional Official )							
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print Edward H. Yeterian, V.P. for Academic and Dean of Faculty	Affairs					

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information

Interagency Report Control Ng...

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 11-R-0015

CUSTOMER NUMBER: 78

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Diamed, Inc. 2 Inland Farm Drive Windham, ME 04062

Telephone: (207) -892-7521

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )					
A.  Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which leaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
Conts:	2	0	0	Ð	
13. Other Animals					
					.*

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)							
/							
SIGNATURE OF C.E.O. OR INSTRUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print	DATE SIGNED					
4. V. Une	Dr. KARL P. Ringel M.D. Ph.D.	fresident 10/10/02					

See attached form for additional information Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 11-R-0016

CUSTOMER NUMBER: 103

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

04103

Immucell Corporation 56 Evergreen Drive Portland, ME 04103

Telephone: (207) -878-2770

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

Immucell corporation 56 EYERGREEN DR. PORTLAND, ME 0410

FACILITY LOCATIONS (Sites) - See Atached Listing

REPORT OF ANIMALS	USED BY OR UNDER	CONTROL OF RESEAR	ICH FACILITY ( Attach addition:	al sheets if necessary or use APHIS Form 7023A \	
A.  Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs		1			
7. Hamsters					
8. Rabbits		2			2
9. Non-human Primate					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

### ASSURANCE STATEMENTS

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1111	CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  (Chief Executive Officer or Legally Responsible Institutional Official)	
SIGNATURE OF C.E.O. OR INSTRUMONAL OFFICIAL	Michael F. Brigham, Presidentand CEO	DATE SIGNED

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM/8-23 (OCT 88), which is obsolete.

See attached form for additional information Interagency Report Co

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 11-R-0020

CUSTOMER NUMBER: 754

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Bio Products, Inc. 29 Taylor Street Suite #1 Portland, ME 04102

Telephone: (207) -761-2728

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

637	Mere 8	ant	Red,	Brunswich,	ME	FACILITY LOCATIONS (Sites)	- See Atached Listing
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A.  Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E )
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate				·	
10. Sheep					
11. Pigs	None	None	Nove	NOAL	None.
12. Other Farm Animals		<i>J J J J J J J J J J</i>			
13. Other Animals					

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. 1	CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official )	
SIGNATURE OF A.T.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)  MANUL C. LLEIN. PLESIDIFNT + CEB	DATE SIGNED

CHIT

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 11-R-0023

CUSTOMER NUMBER: 10136

FORM APPROVED OMB NO 0579-0036

P.02/02

Idexx Laboratories Idexx Laboratories 1 Idexx Dr Westbrock, ME 04092

Telephone: (207) -855-0647

3. REPORTING FACILITY (List all locations where arimals were housed or used in actual research, leating, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Siles) - See Alached Listing

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in leaching, lessing, experiments, research, or surgery but not ye	C. Number of shims upon which leading, notested, experiments, or lests were conducted involving no pain, distress, or use of pain-relieving shugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tosts were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgestic, or tranquillizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F.  TOTAL NUMBER OF ANIMALS  (COLUMNS C+D+E)
4. Dogs	٥	ی	0	0	0
5. Cats	0	0	8	0	D
8. Guinea Pigs	0	0	0	0	0
7. Hamaters	0	D	0	0	Φ
8. Rabbits	O	0	0	0	0
9. Non-human Primata	٥	0	0	0	0
10. Sheep	ò	0	0	0	0
11. Pigs	0	0	0	0	Ø
12. Other Farm Animals	8	٥	0	0	0
13. Other Animala	D	O	٥	0	٥

# ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)					
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	JON AYERS CEO	DATE SIGNED			
APHIE FORM 7073   I (Redisces VS FORM 18-23 (OCT 66) which is observe					

(AUG 21 )

4 18-23 (OCT 68), which is obsciote.